ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	6-19-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	0	.... Objected

Claim		Date											Claim		Date											Claim		Date										
Final	Original												Final	Original													Final	Original											
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	50													100														150											

**If more than 150 claims or 10 actions
staple additional sheet here**

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